

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMT		
O.I.P.E. CLASSIFIER	pur	32	1/7/89
FORMALITY REVIEW		64934	1/15/89

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 + ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 0 ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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12	✓	✓	
13	✓	✓	
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45	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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TEAM 2